GOVERNMENT OF MADRAS.

Public (1954) Department.

~~Endorsement~~
~~D.O.~~
Memorandum
~~Lodged~~

No. 1757 RD P VI/54-1

Dated 30/9/1954.

Passed
Sub Secretary
19/10/54

FURTHER PAPERS.

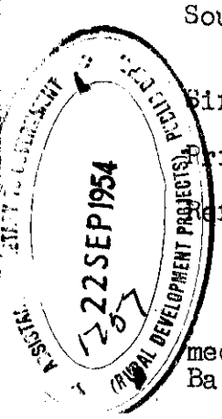
Department.	Number.	Series.	Date.

Ref.C.No.39/54-C.

Project Executive Office,S.K.,
Mangalore, dated 17-9-1954.

From
Sri.H.Narasimha,
Project Executive Officer,
South Kanara, Mangalore.

To
The Director of Community Projects
& Ex.Officio Addl. Secretary to
Government, Madras.



Sir,

Community Projects--South Kanara--Medical forms--Requirements Primary Health Centres--Indent--Submitted.

Ref: From the Medical Officer,P.H.C. Bajpe--Ref.C.No.108/54 dated 2--9--1954.

--

I enclose herewith two indents in duplicate for the medical forms required for the use at Primary Health Centres-Bajpe and Hebri separately;

I request that the indents may kindly be forwarded to the Controller of Stationery and Printing for favour of early compliance.

Yours faithfully,

Project Executive Officer.

Copy to Medical Officer,P.H.C. Bajpe.
JC/18-9-54.

Annual Indent for Medical Forms and Books for the use of Primary Health Centre Bappe — 1954-1955

27

INSTRUCTIONS.

C.F. 349—23,843—6-1-54.

1. Care must be taken to see that columns (2-*a*) to (7) are filled in, in respect of every form sanctioned for the officer whether any claim is made in columns (8) and (9) or not. If, in any case, it is found impossible to fill in columns (2-*a*) to (7), the reason should be stated, and if forms are claimed in columns (8) and (9), the data on which the quantity claimed has been calculated, should be explained in the remarks column.

2. Where more than one vernacular is recognized in a district, e.g., Telugu and Oriya in Ganjam, particulars as to the number to be printed in each vernacular should be furnished in the case of all vernacular or diglot forms.

3. No form should be added in manuscript unless they have been specially sanctioned by the Government or Head of the Department in respect of subordinate offices. The number and date of the order should be quoted.

4. Indents not prepared in accordance with these instructions will be returned.

5. The following certificate should be furnished on the last page of the indent:—

"I certify that I examined the stock of forms on , and found the same correct according to the book balance except in the case of forms shown in the accompanying statement."

Serial number in the standard list. (1)	Group and name of form as per standard list. (2)	Book of—leaves. (2-*a*)	Total Consumption during the years. 19 –19 . (3)	19 –19 . (4)	Average annual consumption. (5)	Balance actually on hand at date of indent. (6)	Number required during remainder of supply year, i.e., usually column (5) ÷ (12) × number of months remaining. (7)	Number now claimed, i.e., column (7) + column (5) — column (6). (8)	Remarks and number passed when alterations are made by checking officers. (9)
Serial Number									
8.	Nominal register out-patients 1st size	1/4 G.B.D.F						3	
9	-do- 2nd size	-do-						6	
10	-do- in-patients Ticket size	1/2 -do-						1	
12	Operation register - 1st size	1/2 - do -						1	
13	- do - 2nd size	1/2 - do -						1	
15	Out-Patient prescription Ticket	1/16 - do -						25000	
20	Daily register showing diseases of in and out patients	1/2 Po. DF						3	
21	Daily register showing classes and causes of in and out patients	1/4 G.B.D.F						2	
24	Vaccination Certificate Book	1/8 D.B.D.F						1	
25	Accident Register	1/8 white Pg. DF						1	
26	Intimation of accidents and injuries Ticket pothi	1/16 G.B.D.F						2	

(1)	(2)	(2-a)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
36	Forms to accompany specimens for examination to Kitasato Institute	1/16 D.B.D.F						2.	
68	Certificate of physical fitness for inoculation serums and for appointment to a State bourse	1/8 "						25	
								25	
69	Medical certificate for non-gazetted officers for leave exemption of limbs	1/16 "						50	
74	Certificate of fitness to resume duty	1/24 "						50	
76	Certificate of drunkenness	1/8 White Pg DF						100	
97	Register of patients receiving anti-rabic treatment	1/2 D.B.D.F						1	
98	Dog-bite treatment attendance register	1/4 "						1	
102	Anti-rabic treatment forms for enquiring health of patients	1/32 White cartridge						50	
104	Register for the maintenance of accounts relating to the daily maintenance allowance of indigent patients undergoing anti-rabic treatment							1	
107	Anti-rabic index card	1/16 White cartridge						100	
111	For external use only	1/240 D' Cream						100	
113	Lotio Acid Carbolic (Calvert)	1/48.						12	
114	Lotio Hydrargyri Perchloride	1/48						12	
117	Mist Bottomatic	1/16 D'Cream						12	

(1)	(2)	(2a)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
118	Mixturē Bismuth Sed	1/64 G.B.GF						12	
120	Mixturē Carminativa	"						12	
125	Mixturē Diaphoretica	"						12	
129	" Expectorans	"						12	
130	" Opii	"						12	
132	" Pot. Iodidi	"						12	
133	" Quininæ	"						12	
134	" Senegæ	"						12	
137	" Sulphatis Zinci	"						12	
139	one ounce to be later	1/16 white Pg						100	
144	Linen Book	5/8 GB.DF						1	
146A	Duty book smaller	1/8 G. B. DF						1	
147	Stock ledger for medicines surgical instruments and appliances	1/3 white Pg						3	
148	" Second size.	"						3	
149	Medical register of Combined Hosp and stock book of Journal instruments and appliances.	3. G. BDF						1	
13.	Arg Prot.	1/128 yellow DF						20	
15	Argenti Nitras	"						20	
16	Atropiæ Sulphas	"						20	
7	2.13. do	"						20.	
8	6). Plasma	1/8. "						20	

To the Primary Health Centre Bayye and Kelin. Opened recently and only price meal supplies were being received from District Medical office and Project Executive office No incident has been placed from this Institution previously and there are the initial supplies asked for.

Medical Officer
Primary Health Centre
Bayye.

9/c

returning.

A.F. (R.D.)
28/5/84

Annual Indent for Medical Forms and Registers for the use of Primary Health Centre Helu 1954-1955 45

INSTRUCTIONS.

C.F. 349—23,843—6-1-54.

1. Care must be taken to see that columns (2-*a*) to (7) are filled in, in respect of every form sanctioned for the officer whether any claim is made in columns (8) and (9) or not. If, in any case, it is found impossible to fill in columns (2-*a*) to (7), the reason should be stated, and if forms are claimed in columns (8) and (9), the data on which the quantity claimed has been calculated, should be explained in the remarks column.

2. Where more than one vernacular is recognized in a district, e.g., Telugu and Oriya in Ganjam, particulars as to the number to be printed in each vernacular should be furnished in the case of all vernacular or diglot forms.

3. No form should be added in manuscript unless they have been specially sanctioned by the Government or Head of the Department in respect of subordinate offices. The number and date of the order should be quoted.

4. Indents not prepared in accordance with these instructions will be returned.

5. The following certificate should be furnished on the last page of the indent:—

"I certify that I examined the stock of forms on , and found the same correct according to the book balance except in the case of forms shown in the accompanying statement."

Serial number in the standard list. (1)	Group and name of form as per standard list. (2)	Book of—leaves. (2-*a*)	Total Consumption during the years. 19 –19 . (3)	19 –19 . (4)	Average annual consumption. (5)	Balance actually on hand at date of indent. (6)	Number required during remainder of supply year, i.e., usually column (5) ÷ (12) × number of months remaining. (7)	Number now claimed, i.e., column (7) + column (5) — column (6). (8)	Remarks and number passed when alterations are made by checking officers. (9)
8.	Maternal Register ante-partum	¼ G B DF						3	
9	- do - 2nd copy	- "						6	
10	- do - ante-partum Card	½ - do -						1	
12	Operation Register Book	½ - do -						1	
13	- do - 2nd copy	½ - do -						1	
15	Ante-Partum Report Card	1/16 - do -						25000	
20	Delivery Register	¼ FC - DF						2	
21	Register of Operations	¼ G B DF						2	
24	Stillbirth Certificate Book	½ G B DF						1	
25	Antenatal Register	½ G B DF						1	
26	Delivery Certificate	¼ G B DF						2	

(1)	(2)	(2-a)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
36	Forms to accompany Notice for [illegible]	1/16 R.B.D.F						2.	
68	Certificate of Physical fitness for [illegible]	1/2 "						25—	
69	Medical certificate from Gazette [illegible]	1/16 "						50	
71	Certificate of fitness to [illegible] duty	1/2 G "						50	
76	Certificate of character	1/8 [illegible] P.S.						100	
97	Register of patients receiving [illegible]	1/2 R.B.D.F						1	
98	Duty List treatment allowance	1/11 "						1	
102	Anti-rabic treatment form for [illegible]	1/2 [illegible]						50	
104	Register for the examination of [illegible]							1	
107	Anti-rabic index Card	1/16 [illegible]						100	
111	Prophylactic [illegible]	1/2 [illegible]						100	
113	Notice Anti-rabic (Rabic)	1/4 "						12	
114	Notice Hydrophobia [illegible]	1/4 "						12	
117	Notice Anti-rabic	1/16 "						12	

9+7

(1)		(3a)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
115	Marble Brass Head	1/6 Gr. Gr. Sp.						12	
120	Marble Lesson Tablet	"						12	
125	Marble Decoration							12	
129	" Ukpabia							12	
130	Ipwa Op.	"						12	
132	PO. Jadida	"						12	
133	Quinine	"						12	
130	Soap	"						12	
137	Sulphate Tablet							12	
139	Cucumber Lake	1/6 Gr. Pg.						100	
111	Iron Bed	1/3 Gr. B. Dr.						1	
116A	Dining Room Table	1/3 Gr. B. Dr.						1	
147	Black Ledger for Medicine	1/3 Gr. Black Bk						3	
111	Surgical Instrument Case							3	
19	Hardware of the Church								
	Communion Table Cloth	1/3 Gr. Blue						1	
	Wash Stand								
13	Bright	1/6 Gr. Blue Dr.						20	
14	Bright Bible							20	
16	Hymn Book	"						24	
7	2-15 drops							20	
	PC								

67. Smoke Furnace and Black Varnish 1/6 Gr. Blue Dr. 20

Re: Hostile Primary Health Centre Bappa and Kehi has been opened and only piecemeal supplies were heavy received from the District Medical Officer and Project Executive Officer, no medicine has been placed from the distribution previously and there are no medical supplies available for

Pharmacy
Medical Officer
In addition Charge of
PHC. Kehi

c/c

Comptroller

AS. (RDP)
2/9/84

Pub (RDP VI)

Memo. No. 1757 RDP VI/54-1

30-9-1954

Sub:- C.D.S - South Kanara - Medical forms - Requirements of Primary Health Centres at Bajpe & Hebri - Indent for 1954-55 - Forwarded -

Ref:- From the D.E.O., Mangalore, C. No. 39/54-C, dt 17.9.1954

The indents for the supply of Medical forms to the Primary Health Centres at Bajpe and Hebri for the year 1954-1955 received from the D.E.O, Mangalore are forwarded to the C of S. & P. duly countersigned for compliance at an early date.

28-9-54

To the C of S & P, Madras (with enclosures)

copy to the D.E.O, Mangalore

SF. VII

Typed and 3 spare copies 1.10.54

CENTRAL DESPATCH BRANCH

Despatched to C. of S. & P. Madras.

Date 1.10.54. Despatcher's Initials.

NOTE:- Please see the letter from the D.E.O, Mangalore & its enclosures in the C.f. The indents on pp 3-6 & 11-14 C.f may be countersigned and forwarded to the C of S & P. for

compliance. Subject to orders, the
draft memo overleaf is put up for approval
on
28/9/54.
28/9/54

28/9/54

(Issued as Memo No. 17 S&T R&D(i)/52
Public Ltr 305 JL

From
H.J. Stocks, I.A.S.,
Controller of Stationery
and Printing., Madras.

To
The Secretary to Government,
Public Department,
Fort St. George, Madras.

Pr. No.1156-109269/54.C.R. dated 15-10-54.

Sub: Community Projects - South Kanara - Medical forms Supply to Primary Health Centres at Bajpe and Hebri.

Ref: Government Public Department Memorandum No.1757 - RDP - VI./54-1, dated 30-9-54.

--

I request to be informed whether the Medical Forms indented for by the Primary Health Centres at Bajpe and Hebri may be supplied free of cost, on cost recoverable basis or on pre-payment.

for Controller. 19/10

ckg/13.10

Pub(RD)VII) Dept

Memo No. 2424 RDPVI | 54-1 dt. 10.54

Sub:- C.P.S- South Kanara - Medical forms -
Supply to Primary Health Centres at
Bajpe and Hebri -

Ref:- Memo. No. 1757 Pub(RDPVI)/54-1
dated 30.9.1954.
From the C. of S&P., Madras,
Pr. No. 1156-109269/54-R,
dated 15.10.1954.

The Controller of Stationery and Printing is informed that the Medical forms may be supplied to the P.H.Cs, Bajpe & Hebri on payment of cost. The bill of cost may be sent to the

E-44

D.E.O., Mangalore for acceptance.

Sd
27-10-54.

28/X/54.

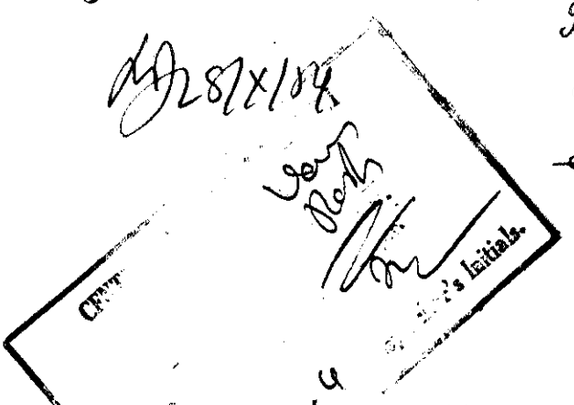
To the C. of S & P, Madras.

copy to the DE.O., Mangalore

~~copy to the Asst (N) P.III & VIII~~ with copy of 11 of (E).

S.F. VII

Typed



NOTE! – Please see the letter from the C. of S & P. ~~on the~~ file. All supplies of stationery & forms to the CP & NES officers are made on payment of cost only. The supply of medical forms to the P.H.O.s, Bajpe and Hebri may also be on payment of cost. Subject to orders, the draft memo. on pp 1-2 above is put up for approval. After issue, this may be added to the papers at (F)

Sd
27.10.54

28/X/54